06/08/2011 15:45

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FORM 3X

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

•		For Oth	ner Than An	Authoriz	ed Commit	tee		Office Us	e Only	
1.	NAME OF COMMITTEE (in full)		C MAILING LAN	_	example:If typing ver the lines	ig, type		• • • • •		
L	Massachusetts Republican S	state Cong	ressional Comn	nittee						
Ш										
AD	DRESS (number and street)	85 Me	errimac St.							
	Check if different	Suite	400 							
L	than previously reported. (ACC)	Bosto	n 				MA J	02	2114	
2.	FEC IDENTIFICATION NUM	IBER	—	CITY 🛕			STATE	:	ZIPCODE	A
	C00042622			3. IS THIS		NEW (N) OR	X	AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	`´ I	Monthly Report Due On:	Feb 20 (M	12)	May 20 (M5)		Aug 20 (M8)	Ye	ov 20 (M11) lon-Election ear Only)
	(a) Quarterly Reports:		Suc On.	Mar 20 (M	13)	Jun 20 (M6)		Sep 20 (M9)	De (N Ye	ec 20 (M12) lon-Election ear Only)
	April 15			Apr 20 (M	4)	Jul 20 (M7)		Oct 20 (M10)	χ Ja	an 31 (YE)
	Quarterly Report(Q1) July 15 Quarterly Report(Q2)		c) 12-Day		Primary (12	P)	Gene	eral (12G)	Rı	unoff (12R)
		2)	PRE-Election Report for t		Convention	(12C)	Spec	ial (12G)		
	October 15 Quarterly Report(Q	3)						_		
	January 31 Quarterly Report(Yl	E)		Election on	11	02	2010		in the State of	
	July 31 Mid-Year Report(Non-election Year Only) (MY)	n (0	d) 30-Day Post -Elect Report for t		General (30	0G)	Runc	off (30R)	Sr	pecial (30S)
	Termination Report (TER)		·	Election on					in the State of	
5.	Covering Period 1 1	2	201	0	through	12	31	2010		
l ce	ertify that I have examined this F			ny knowledg	e and belief it i	s true, correct	and compl	ete.		
Тур	oe or Print Name of Treasurer	Bren	t Anderson							
Sig	nature of Treasurer Electron	nically File	ed by Brent A	nderson			Date	0 1 0 6	20	010
NO	TE : Submission of false, error	neous, or i	incomplete infor	mation may	subject the per	son signing th	is Report to	the penalties	of 2 U.S.C	437g.
	Office Use								FORM (3X

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Massachusetts Republican State Congressional Committee D D " D 11 23 2010 12 31 2010 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 77412.05 January 1 (b) Cash on Hand at 302559.85 Begining of Reporting Period 6442.00 2909750.75 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 309001.85 2987162.80 6(a) and 6(c) for Column B) 82542.69 2785310.75 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 226459.16 201852.05 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 5660.20 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

> Federal Election Commission 999 E street, NW Washington, DC 20463

> > Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

м м 1 1 23 м°м 12 3 1 2010 2010 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 7450.00 1820496.50 (i) Itemized (use Schedule A) -2808.00 54652.88 (ii) Unitemized (iii) TOTAL (add 4642.00 1875149.38 Lines 11(a)(i) and (ii) 0.00 55.00 (b) Political Party Committees Other Political Committees 1800.00 85722.37 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 1960926.75 6442.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 948824.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 6442.00 2909750.75 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 6442.00 2909750.75 (subtract Line 18(c) from Line 19)

FE6AN026

DETAILED SUMMARY PAGE

of Disbursements

FEC. Form 3X (Rev. 02/2003) Page 4

FEC Form 3X (Rev. 02/2003)		Page 4		
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
11. Operating Expenditures:	Total Tino Fellou	Calcindal Teat-to-Date		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating				
Expenditures	61294.12	1478136.87		
(c) Total Operating Expenditures	61294.12	1478136.87		
(add 21(a)(i), (a)(ii) and (b)) 2. Transfers to Affiliated/Other Party	01204.12	1470100.07		
Committees	21248.57	21248.57		
Contributions to Federal Candidates/Committees				
Federal Candidates/Committeesand Other Political Committees	0.00	0.00		
Independent Expenditure (use Schedule E)	0.00	0.00		
Coordinated Expenditures Made by Party				
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	677026.52		
6. Loan Repayments Made	0.00	0.00		
7. Loans Made	0.00	0.00		
8. Refunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs)(d) Total Contribution Refunds	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00		
(1111 -1111 -1111), (17, 1111 (17, 11111)				
9. Other Disbursements	0.00	0.00		
0. Federal Election Activity (2 U.S.C 431(20))				
(a) Shared Federal Election Activity				
(from Schedule H6)	0.00	0.00		
(i) Federal Share				
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	608898.79		
(c) Total Federal Election Activity (add	0.00	608898.79		
Lines 30(a)(i), 30(a)(ii) and 30(b))				
11. Total Disbursements (add Lines 21(c), 22,	82542.69	2785310.75		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	02042.03	2700010.75		
32. Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)	90540.60	0705010.75		
from Line 31)	82542.69	2785310.75		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	6442.00	1960926.75
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	6442.00	1960926.75
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	61294.12	1478136.87
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	61294.12	1478136.87

FE6AN026

Mailing Address 32 Sagamore Rd. City State Zip Code Wellesley MA 02481 FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 45 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A. Robert Ahistorn Mailing Address 34 Washington St City State Zip Code Bedford MA 01730 FEC ID number of contributing federal political committee. Name of Employer Refired Receipt For: Pall Name (Last, First, Middle Initial) Pal A Barringer Mailing Address 32 Sagamore Rd. City State Zip Code Pall Name (Last, First, Middle Initial) Pal A Barringer Mailing Address 32 Sagamore Rd. City State Zip Code Wellesley MA 02481 FEC ID number of contributing federal political committee. C Cupation Receipt For: Primary General Other (specify) ▼ MA 02481 FEC ID number of contributing federal political committee. C Description Requested Receipt For: Primary General Other (specify) ▼ MA 0930 FEC ID number of contributing federal political committee. C Date of Receipt Transaction ID: 10106 C187404 Amount of Each Receipt this Period Transaction ID: 10106 C187404 Amount of Each Receipt this Period Date of Receipt Transaction ID: 10106 C187404 Amount of Each Receipt this Period Primary General Occupation President/CEO Receipt For: Primary General Occupation President/CEO		or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Primary General Other (specify) ▼	∠ A .	Robert Ahlstrom Mailing Address 34 Washington St City Bedford FEC ID number of contributing federal political committee.	MA C Occupation	01730	Transaction ID: 10106.C187353 Amount of Each Receipt this Period
B. Paul A. Barringer Mailing Address 32 Sagamore Rd. City State Zip Code MA 02481 FEC ID number of contributing federal political committee. Name of Employer Information Requested Full Name (Last, First, Middle Initial) Theodore Charles Mailing Address 65 Eastern Point Blvd. City State Zip Code MA 01930 FC ID number of contributing federal political committee. Date of Receipt Transaction ID: 10106.C187341 Amount of Each Receipt this Period Footnote Charles Mailing Address 65 Eastern Point Blvd. City State Zip Code MA 01930 FC ID number of contributing federal political committee. Name of Employer Investors Capital Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID: 10106.C187404 Amount of Each Receipt this Period FC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	_	Primary General	Aggregate		
FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Cty Gloucester Mailing Address 65 Eastern Point Blvd. City Gloucester MA 01930 FEC ID number of contributing federal political committee. Name of Employer Investors Capital Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 10106.C187404 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Ccupation President/CEO Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	В.	Paul A. Barringer Mailing Address 32 Sagamore Rd.	State	Zip Code	12 08 2010
Information Requested Receipt For: Primary General Other (specify) ▼ C. Full Name (Last, First, Middle Initial) Theodore Charles Mailing Address 65 Eastern Point Blvd. City State Zip Code Gloucester MA 01930 FEC ID number of contributing federal political committee. Name of Employer Investors Capital Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt M M 0 1930 Transaction ID: 10106.C187404 Amount of Each Receipt this Period 250.00		FEC ID number of contributing federal political committee.	С		
Mailing Address 65 Eastern Point Blvd. City State Zip Code Gloucester MA 01930 FEC ID number of contributing federal political committee. Name of Employer Investors Capital Receipt For: Primary General Other (specify) ▼ Date of Receipt M M		Receipt For: Primary General	Informat	ion Requested e Year-to-Date ▼	
City Gloucester MA O1930 FEC ID number of contributing federal political committee. Name of Employer Investors Capital Receipt For: Primary Other (specify) ▼ State Zip Code MA O1930 Amount of Each Receipt this Period C C Aggregate Year-to-Date Aggregate Year-to-Date Z50.00	- C.	Theodore Charles			M M / D D / Y Y Y Y
Receipt For: Primary Other (specify) ▼ Occupation President/CEO Aggregate Year-to-Date 250.00		•		•	Transaction ID: 10106.C187404
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		federal political committee.		on .	250.00
SUBTOTAL of Receipts This Page (optional)		Receipt For: Primary General	Presiden	nt/CEO e Year-to-Date ▼	
		SUBTOTAL of Receipts This Page (optional) .			950.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 45 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Massachusetts Republican State Con	gressional C	Committee	
Α.	Full Name (Last, First, Middle Initial) Allan Chin Mailing Address 7 Truman Rd	Date of Receipt		
		Chata	7:- O-d-	12 26 2010
	City Peabody	State MA	Zip Code 01960	Transaction ID: 10106.C187453 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Information Requested	Occupation Information	on ion Requested	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Sherryl Cohen Mailing Address 680 Salem End Road	Date of Receipt		
	Mailing Address 680 Salem End Road	12 15 2010		
	City State Framingham MA FEC ID number of contributing federal political committee.		Zip Code 01702	Transaction ID: 10106.C187448
			01702	Amount of Each Receipt this Period 1000.00
	Name of Employer Information Requested	Occupation Informat	on ion Requested	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00]
C.	Full Name (Last, First, Middle Initial) David Dearborn			Date of Receipt
	Mailing Address 16 Beaver Pond Rd	M M / D D / Y Y Y Y Y Y 1 1 2 0 8 2 0 1 0		
	City	State	Zip Code	Transaction ID: 10106.C187408
	Beverly FEC ID number of contributing federal political committee. Name of Employer Retired MA C Occupation Retired		01915	Amount of Each Receipt this Period 100.00
			on	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 200.00	
	SUBTOTAL of Receipts This Page (optional) .			1150.00
	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 45 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Charles Fuller Mailing Address 33 High Ridge Road			Date of Receipt 1 2 0 8 2 0 1 0
	City Boxford	State MA	Zip Code 01921	Transaction ID: 10106.C187322 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	01921	500.00
	Name of Employer Fraen Corp Receipt For: Primary General Other (specify) ▼	Occupatio Executive Aggregate		
_ 3.	Full Name (Last, First, Middle Initial) Howard Gardner Mailing Address PO Box 697			Date of Receipt 1 2 1 5 2 0 1 0
	City	State	Zip Code	Transaction ID: 10106.C187447
	North Andover FEC ID number of contributing federal political committee.	MA C	01845	Amount of Each Receipt this Period 250.00
	Name of Employer Information Requested	Occupatio	n ion Requested	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
_).	Full Name (Last, First, Middle Initial) Nancy Ghareeb			Date of Receipt
•	Mailing Address 91 MacArthur Rd.	1 2 0 8 2 0 1 0		
	City Stoneham	State MA	Zip Code	Transaction ID: 10106.C187395
	FEC ID number of contributing federal political committee.	C	02180	Amount of Each Receipt this Period 100.00
	Name of Employer Retired	Occupatio Retired	n	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 200.00	
	SUBTOTAL of Receipts This Page (optional)			850.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 45 (check only one) X	
4	Any information copied from such Reports and or for commercial purposes, other than using th	Statements man	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) Massachusetts Republican State Cor				
۷.	Full Name (Last, First, Middle Initial) George Haynes			Date of Receipt	
	Mailing Address 1 Broken Tree Road	12 08 2010			
	City Medway	State MA	Zip Code 02053	Transaction ID: 10106.C187381 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		100.00	
	Name of Employer Retired	Occupatio Retired	n		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00		
. –	Full Name (Last, First, Middle Initial) Bernhard Heersink			Date of Receipt	
	Mailing Address 281 High Street	12 08 2010			
	City	State	Zip Code	Transaction ID: 10106.C187274	
	Newburyport MA		01950	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		100.00	
	Name of Employer Self Employed	Occupatio Physicia			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		275.00		
_	Full Name (Last, First, Middle Initial) Robert Lawrence			Date of Receipt	
	Mailing Address 24 Jackson Pond Ro		12 08 2010		
	City Dedham	State	Zip Code 02026	Transaction ID: 10106.C187398	
	Dedham MA FEC ID number of contributing federal political committee. Name of Employer Retired Occupation Retired		02020	Amount of Each Receipt this Period 250.00	
			n		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1250.00		
	SUBTOTAL of Receipts This Page (optional)			450.00	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 45 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)	9.000.0.10.		Data of Passint
۱.	Winford Nowell Mailing Address 8 Rollins St.			Date of Receipt 1 2 0 8 2 0 1 0
	City	State	Zip Code	Transaction ID: 10106.C187390
	Groveland	MA	01834	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Retired	Occupation Retired	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Microsoft PAC	1		Date of Receipt
	Mailing Address 16011 NE 36th Way	12 15 2010		
	City	State	Zip Code	Transaction ID: 10106.C187436
	Redmond FEC ID number of contributing federal political committee.	C	98073	Amount of Each Receipt this Period
	Name of Employer Information Requested	Occupation Informati	n on Requested	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Bradlee Perry	1		Date of Receipt
	Mailing Address 865 Central Ave. Apt k-109			12 08 7 2010
	City Needham	State MA	Zip Code 02492	Transaction ID: 10106.C187285
	FEC ID number of contributing federal political committee.	C	02452	Amount of Each Receipt this Period 250.00
	Name of Employer Information Requested	Occupation Informati	n on Requested	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1350.00

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 45 (check only one) X
or for c	ormation copied from such Reports and S ommercial purposes, other than using the ME OF COMMITTEE (In Full) ssachusetts Republican State Cong	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Arth Mai	Name (Last, First, Middle Initial) ur Ryan ling Address 119 Mt. Pleasant Ave.	Ctoto	Zip Code	Date of Receipt 1 2 0 8 2 0 1 0
FEC	oucester CID number of contributing	State MA	01930	Transaction ID: 10106.C187287 Amount of Each Receipt this Period 1000.00
Nar Ret	eral political committee. ne of Employer irred eipt For: Primary General Other (specify)	Occupatio Retired	n e Year-to-Date ▼	
B. Fran	Name (Last, First, Middle Initial) ncis Sears ling Address PO Box 579	I		Date of Receipt 1 2 0 8 2 0 1 0
FEC	milton C ID number of contributing eral political committee.	State MA	Zip Code 01936	Transaction ID: 10106.C187317 Amount of Each Receipt this Period 500.00
	ne of Employer ne Webber	Occupatio VP	n	
Rec	eipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
. Gilb	Name (Last, First, Middle Initial) ert Steward ling Address 137 Larch Row			Date of Receipt 1 2 0 8 2 0 1 0
City We	enham	State MA	Zip Code 01984	Transaction ID: 10106.C187280 Amount of Each Receipt this Period
	CID number of contributing eral political committee.	C		1000.00
	ne of Employer ired	Occupatio Retired	n	
Rec	eipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2000.00	
SUBT	OTAL of Receipts This Page (optional)			2500.00

S

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 45 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full) Massachusetts Republican State Cor	ngressional Committee	
Full Name (Last, First, Middle Initial) Clifford F. Washer Mailing Address 2 Great Rd		Date of Receipt
City	State Zip Code	1 2 0 8 2 0 1 0 Transaction ID: 10106.C187364
Bedford FEC ID number of contributing federal political committee.	MA 01730	Amount of Each Receipt this Period 200.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 200.00	

SUBTOTAL of Receipts This Page (optional)	•	200.00
TOTAL This Period (last page this line number only)	<u> </u>	7450.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 13 / 45 (check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to			
NAME OF COMMITTEE (In Full)			
Massachusetts Republican State Co	ngressional C	committee	
Full Name (Last, First, Middle Initial) Republican National Committee			Date of Receipt
Mailing Address 310 First Street SE			12 10 7 2010
City	State	Zip Code	Transaction ID: 10106.C187410
Washington	DC	20003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1800.00
Name of Employer Political Committee	Occupation FEC ID:	n C00003418	
Receipt For: Primary General Other (specify) ▼	55 5	e Year-to-Date ▼ 29800.00	

SUBTOTAL of Receipts This Page (optional)	>	1800.00
TOTAL This Period (last page this line number only)	•	1800.00

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			LINE NUMBER: PAGE 14/4								
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 2	1b 7	22 28a	_	23 28b	24 28c	П	25 29	\square	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										S		
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Committee											
Full Name (Last, First, Middle Initial) Republican National Committee Mailing Address 310 First Street SE				Date		sburse	: 10106 ement		8741 0 1 (
,	State Zip Code DC 20003			Amou	ınt of	Each	Disburse	ement	this I	Period		
Purpose of Disbursement IN KIND: FOR VOIP PHONES Candidate Name		Categor Type	y/	L.				180	00.00)	_	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	. , , , ,										
Full Name (Last, First, Middle Initial) Tim Buckley Mailing Address 55 W Broadway #8				Date		sburse	: 10106 ement 2.5 /		2777 0 1 (
,	State Zip Code MA 02127			Amou	ınt of	Each	Disburse	ement	this I	Period		
Purpose of Disbursement PAYROLL	1VIA 02121							54	46.46	3		
Candidate Name		Categor Type	y/									
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼											
Full Name (Last, First, Middle Initial) Tim Buckley				Date	of Dis	sburse	: 10106 ement					
Mailing Address 55 W Broadway #8				1 1	M /	□3	3 O /	ž	0 Ĭ () ^Y		
Boston	State Zip Code MA 02127			Amou	ınt of	Each	Disburse	-				
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL Candidate Name		Categor	y/		•	•		۷.	73.68	3	_	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Туре										
State: District:	Other (specify)											
SUBTOTAL of Disbursements This Page (optional) .			<u> </u>					262	20.14	1		

TOTAL This Period (last page this line number only)

 $\textbf{C.} \ \ \, \text{Form/Schedule}: \ \, \textbf{SB21b}$

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s))	FOR LII			R:		P	AGE	16 /	45
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 21b	F	22 28a		23 28b	24 28c		25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam					r the pu			oliciting c			8
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Committee										
Full Name (Last, First, Middle Initial) Tim Buckley Mailing Address 55 W Broadway #8 City Boston	State Zip Code MA 02127				Date	of D	isburse	10106 ement	Ž	0 1 C	
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL Candidate Name Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)		tegory/ Гуре		L.				.2	37.62	2
Full Name (Last, First, Middle Initial) Tim Buckley Mailing Address 55 W Broadway #8					Date		isburse	10106 ement		2780 2 0 1 0) ^Y
City Boston Purpose of Disbursement	State Zip Code MA 02127				Amou	int o	f Each	Disburse	-	t this f	
REIMBURSEMENT FOR TRAVEL Candidate Name		ı	tegory/ Γype								
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)										
Full Name (Last, First, Middle Initial) Ryan Coleman					Date	of D	isburs				V
Mailing Address 9 Stearms Street					1 1	М	/ L ^D 2	4	Ž	010)
Swampscott Purpose of Disbursement PAYROLL Candidate Name	State Zip Code MA 01907		tegory/ Γype		Amou	int o	f Each	Disburse	-	t this I	
Office Sought: Senate President State: Disburse	ement For: Primary General Other (specify)										
SUBTOTAL of Disbursements This Page (optional)			>	-	·	•	•		9	47.53	

TOTAL This Period (last page this line number only)

A. Form/Schedule: SB21b

Transaction ID: 10106.E12779

B. Form/Schedule: SB21b Bowdoin Square Exxon 239 Cambridge St. Boston, MA 02114

C.

SCHEDULE B (FEC Form 3X)	Use separate schedu			FOR LIN		R:		P	AGE	18 /	45		
ITEMIZED DISBURSEMENTS	for each category of Detailed Summary P		1-	X 21b 27	22 28a	П	23 28b	24 28c		25 29	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name											3		
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Committee												
Full Name (Last, First, Middle Initial) Nick Connors Mailing Address 74 Green Street					Transaction ID: 10106.E12790 Date of Disbursement								
,	State Zip Code MA 02180				Amou	nt o	f Each	Disburs	emer	nt this I	Period		
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL Candidate Name				egory/			•		.4	169.21			
Office Sought: House Disburse Senate President State: District:	ement For: Primary Gen Other (specify)	neral											
Full Name (Last, First, Middle Initial) Nick Connors					Date o		sburse				Y		
Mailing Address 74 Green Street					1 1		3	3 O /	2	2 o 1 c)		
,	State Zip Code MA 02180				Amou	nt o	f Each	Disburs	emer	nt this I	Period		
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL						_			3	373.15	5		
Candidate Name				egory/ ype									
Office Sought: House Disburse Senate President State: District:	ement For: Primary Gen Other (specify)	neral											
Full Name (Last, First, Middle Initial)					Trans	acti	on ID:	: 1010	6.E1	2776			
Tarah Donoghue Mailing Address 3 Main Street					Date of	of Di		ement	Y	20 i () ^Y		
City Dover	State Zip Code MA 02030				Amou	nt o	f Each	Disburs	emer	nt this I	Period		
Purpose of Disbursement PAYROLL									15	38.71			
Candidate Name				egory/ ype									
Office Sought: House Disburse Senate President	ement For: Primary Other (specify)	neral		<u>- · </u>									
State: District:	Caron (Spoonly)												
SUBTOTAL of Disbursements This Page (optional)				▶					23	81.07	7		

TOTAL This Period (last page this line number only)

A. Form/Schedule: SB21b

Transaction ID: 10106.E12790

B. Form/Schedule: SB21b Bowdoin Square Exxon 239 Cambridge St. Boston, MA 02114

C.

SCHEDULE B (FEC Form 3X)		arate schedule(s)						PAGE 20 / 45						
ITEMIZED DISBURSEMENTS		category of the Summary Page	١.	X	_		22 28a	П	23 28b	24 280		25 29	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam					y persor		the pu		se of s	oliciting o	ontri	butions	\bot	
NAME OF COMMITTEE (In Full)														
Massachusetts Republican State Congress	sional Con	nmittee												
Full Name (Last, First, Middle Initial) Anthony Ferrucci						Transaction ID: 10106.E12745 Date of Disbursement								
Mailing Address 62 Dwight St. Apt. #1						111 D 2 4 Y 2 0 1 0 Y								
City Brookline	State MA	Zip Code 02446				Amount of Each Disbursement this Period								
Purpose of Disbursement PAYROLL				0	•						E	30.68	3	
Candidate Name					gory/ pe									
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ▼												
Full Name (Last, First, Middle Initial)						+								
Anthony Ferrucci							Date o	of Di	isburs				V	
Mailing Address 62 Dwight St. Apt. #1							^M 2	M	[′]	9 /	Y 2	2 0 1 ()	
City Brookline	State MA	Zip Code 02446					Amou	nt o	f Each	Disburs				
Purpose of Disbursement PAYROLL								_			. 6	30.70		
Candidate Name					gory/ pe									
Senate President	ement For: Primary Other (spe	General ▼												
State: District:						\perp								
Full Name (Last, First, Middle Initial) Anthony Ferrucci							Date of	of Di	isburs				_	
Mailing Address 62 Dwight St. Apt. #1							1 ^M 2	M	[/] 2	0 /	2	2 0 1 () \	
City Brookline	State MA	Zip Code 02446					Amou	nt o	f Each	Disburs		-		
Purpose of Disbursement PAYROLL											. 6	30.70		
Candidate Name					gory/ pe									
Senate President	ment For: Primary Other (spe	General ecify) ▼												
State: District:						\perp								
SUBTOTAL of Disbursements This Page (optional)					<u> </u>						18	92.08		

TOTAL This Period (last page this line number only)

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			E NUMBEI	R:	PA	AGE 21 /	45		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(61)	21b 27	lly one) 22 28a	23 28b	24 28c	25 29	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			person	for the pu	pose of so	oliciting co	ontribution	is		
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Committee									
Full Name (Last, First, Middle Initial) Anthony Ferrucci Mailing Address 62 Dwight St. Apt. #1				Date o	action ID: of Disburse	ement	E12748			
,	State Zip Code MA 02446			Amou	nt of Each	ch Disbursement this Period				
Purpose of Disbursement PAYROLL				<u> </u>			630.6	9		
Candidate Name		Catego Type	-							
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)									
Full Name (Last, First, Middle Initial) Kaitlyn Greeley				Date o	action ID:		5.E12749 2 0 1			
Mailing Address 34 Fresno St.	7'- 0-4-									
City Boston	State Zip Code MA 02131			Amoui	nt of Each	Disburse		• • •		
Purpose of Disbursement PAYROLL		·		L.			955.5	0		
Candidate Name		Catego Type	•							
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)									
Full Name (Last, First, Middle Initial) Kaitlyn Greeley					action ID:		5.E12750)		
Mailing Address 34 Fresno St.				1 ^M 2	M / D 0	9 / Y	201	0 ^Y		
City Boston	State Zip Code MA 02131			Amoui	nt of Each	Disburse	ment this	Period		
Purpose of Disbursement PAYROLL		Ů		<u> </u>			955.4	9		
Candidate Name		Catego Type								
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)									
State: District:	- ··· •									
SUBTOTAL of Disbursements This Page (optional)							2541.6	8		

TOTAL This Period (last page this line number only)

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)											
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	22	23 24 25 26 28b 28c 29 30b								
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any perso	on for the purpose	e of soliciting contributions								
NAME OF COMMITTEE (In Full)												
Massachusetts Republican State Congress	ional Committee											
Full Name (Last, First, Middle Initial)			Transactio	on ID: 10106.E12751								
Kaitlyn Greeley			Date of Disbursement									
Mailing Address 34 Fresno St.			12 M / D D D / Y 2010 Y									
City Boston	State Zip Code MA 02131		Amount of	Each Disbursement this Period								
Purpose of Disbursement PAYROLL		•		955.50								
Candidate Name		Category/ Type										
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)											
Full Name (Last, First, Middle Initial) Kaitlyn Greeley			Date of Dis	on ID: 10106.E12752 sbursement								
Mailing Address 34 Fresno St.			12	3 1 Y 2 0 1 0 Y								
,	State Zip Code MA 02131		Amount of	Each Disbursement this Period								
Purpose of Disbursement PAYROLL				955.50								
Candidate Name		Category/ Type										
Senate President	ment For: Primary General Other (specify)											
State: District:												
Full Name (Last, First, Middle Initial) John Hemsley			Date of Dis	on ID: 10106.E12783 sbursement								
Mailing Address 45 Grove St. Apt 1			111 /	^D 3 0								
	State Zip Code MA 02114		Amount of	Each Disbursement this Period								
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL		• •		85.58								
Candidate Name		Category/ Type										
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)											
State: District:												
SUBTOTAL of Disbursements This Page (optional))		1996.58								

TOTAL This Period (last page this line number only)

 $\textbf{C.} \ \ \, \text{Form/Schedule}: \ \, \textbf{SB21b}$

C.

SCHEDULE B (FEC Form 3X)		FOR LINE	NI IMPED:	PAGE 24 / 45
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		1 AGE 247 45
	Detailed Summary Page	X 21b 27	22 23 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Staten		by any person for	or the purpose of solid	citing contributions
or for commercial purposes, other than using the nam	e and address of any political	committee to sol	icit contributions from	such committee
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Committee			
Full Name (Last, First, Middle Initial)			Transaction ID:	10106.E12784
John Hemsley			Date of Disbursem	Y Y Y Y
Mailing Address 45 Grove St. Apt 1			1 1 3 0	2 0 1 0 Y
City Boston	State Zip Code MA 02114		Amount of Each D	isbursement this Period
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL				321.04
Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) John Hemsley			Transaction ID: Date of Disbursem	ent
Mailing Address 45 Grove St. Apt 1			111 / 30	2010
City Boston	State Zip Code MA 02114		Amount of Each D	isbursement this Period
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL	32	· · · ·		1050.19
Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial)				
John Hemsley			Transaction ID: Date of Disbursem	ent
Mailing Address 45 Grove St. Apt 1			111 / 30	2 0 1 0 Y
City Boston	State Zip Code MA 02114		Amount of Each D	isbursement this Period
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL				908.86
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	. 76-2		
State: District:	- ·· •			
SUBTOTAL of Disbursements This Page (optional)		>		2280.09

TOTAL This Period (last page this line number only)

A. Form/Schedule: SB21b

Transaction ID: 10106.E12784

C. Form/Schedule : SB21b Bowdoin Square Exxon 239 Cambridge St. Boston, MA 02114

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMB (check only one)											
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1-	X 21 27	ρĹ	22 28a	П	23 28b	24 28c		25 29	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam			ny per	on fo	or the pu		se of s	oliciting co		outions			
NAME OF COMMITTEE (In Full)													
Massachusetts Republican State Congress	sional Committee												
Full Name (Last, First, Middle Initial) Kirsten Hughes					Transaction ID: 10106.E12753 Date of Disbursement								
Mailing Address 72 Davis Street					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$								
City Quincy	State Zip Code MA 02170				Amount of Each Disbursement this Period								
Purpose of Disbursement PAYROLL									10	13.20)		
Candidate Name			tegory/ ype	1									
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)												
Full Name (Last, First, Middle Initial)				1									
Nick Lehr					Date		isburse				V		
Mailing Address 38 Saunders Rd.					1 1	IVI	້ 2	24	Ž	0 i ()		
City Boston	State Zip Code MA 02134				Amou	ınt o	f Each	Disburse	men	t this f	Period		
Purpose of Disbursement PAYROLL				7					5	46.46	5		
Candidate Name			tegory/ ype										
Senate President	ment For: Primary General Other (specify)												
Full Name (Last, First, Middle Initial) Nick Lehr					Date	of D	isburse				_		
Mailing Address 38 Saunders Rd.					1 1	М	[/] 3	3 0 / Y	ž	0 i () \		
City Boston	State Zip Code MA 02134				Amou	ınt o	f Each	Disburse	-				
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL				7	L.	_			.1	87.56	5		
Candidate Name			tegory/ ype										
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)												
State: District:													
SUBTOTAL of Disbursements This Page (optional)				<u> </u>					174	47.22			

TOTAL This Period (last page this line number only)

C. Form/Schedule: SB21b

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)					28 /	45					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	I —	21b 27	2:		23	ı	24 28c		25 29	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			y person	n for the	e pu	rpose o	of so	liciting c		outions		
NAME OF COMMITTEE (In Full)												
Massachusetts Republican State Congress	sional Committee											
Full Name (Last, First, Middle Initial) Nathan Little						action of Disb		10106 ment	6.E1	2756		
Mailing Address 83 Congreeve				111 24 7 2010								
City Boston	State Zip Code MA 02131			Amount of Each Disbursement this Period								
Purpose of Disbursement PAYROLL				1 L					21	40.16		
Candidate Name			egory/ ype									
Senate President	ement For: Primary General Other (specify)											
State: District:												
Full Name (Last, First, Middle Initial) Nathan Little					-	action of Disb	urse		6.E1	2757		
Mailing Address 83 Congreeve				[M 2	M /	0	9 /	Ž	0 1 C) ^Y	
,	State Zip Code MA 02131			Aı	mou	nt of E	ach	Disburse	emen	t this f	Period	
Purpose of Disbursement PAYROLL] L					21	34.50)	
Candidate Name			egory/ ype									
Senate President	ement For: Primary General Other (specify)											
State: District:												
Full Name (Last, First, Middle Initial) Nathan Little				Da	ate c	of Disb	urse				_	
Mailing Address 83 Congreeve					M 2	M /	^D 2	0 /	Ž	0 Ĭ ()	
City Boston	State Zip Code MA 02131			Aı	mou	nt of E	ach	Disburse			-	
Purpose of Disbursement PAYROLL									21	34.51		
Candidate Name	_		egory/ /pe									
Senate President	ement For: Primary General Other (specify)											
State: District:												
SUBTOTAL of Disbursements This Page (optional)			. •						640	09.17		

TOTAL This Period (last page this line number only)

В.

C.

FE6AN026

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N		PAGE 29 / 45
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only of 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	and address or any political cor	TITTILLEE TO SOILC	il Contributions	nom such committee
Massachusetts Republican State Congress	onal Committee			
Full Name (Last, First, Middle Initial) Nathan Little			Transaction II Date of Disbur	D: 10106.E12759 sement
Mailing Address 83 Congreeve			12 M	31 7 2010
Boston	tate Zip Code MA 02131		Amount of Eac	ch Disbursement this Period
Purpose of Disbursement PAYROLL				2134.50
Candidate Name	C	Category/ Type		
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial)			T	2 40400 540700
Magan Munson			Date of Disbur	
Mailing Address 209 bunker hill st Apt 1			111 /	24 7 2010
•	State Zip Code MA 02129		Amount of Eac	ch Disbursement this Period
Purpose of Disbursement PAYROLL				1136.59
Candidate Name	C	Category/ Type		
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial)			Transaction II	D : 10106.E12761
Magan Munson			Date of Disbur	sement
Mailing Address 209 bunker hill st Apt 1			12 / D	09 / 2010
	State Zip Code MA 02129		Amount of Eac	ch Disbursement this Period
Purpose of Disbursement PAYROLL		•		1136.58
Candidate Name	C	Category/ Type		
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional)				4407.67
TOTAL This Period (last page this line number only).				

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam	nents may not be sold or used	by any person for	or the purpose of soliciting contributions icit contributions from such committee
NAME OF COMMITTEE (In Full)	o and dadress of any pomisa.		31. 33.1. 24.0. 25
Massachusetts Republican State Congress	sional Committee		
Full Name (Last, First, Middle Initial)			Transaction ID: 10106.E12762
Magan Munson			Date of Disbursement
Mailing Address 209 bunker hill st Apt 1			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} $
City Boston	State Zip Code MA 02129		Amount of Each Disbursement this Period
Purpose of Disbursement		· · ·	1136.59
PAYROLL Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			T " ID 10100 F10700
Magan Munson			Transaction ID: 10106.E12763 Date of Disbursement
Mailing Address 209 bunker hill st Apt 1			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & 3 & 1 \\ 3 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Boston	State Zip Code MA 02129		Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL			1136.59
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Charles Pearce			Transaction ID: 10106.E12781 Date of Disbursement
Mailing Address 7 Linden St			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & 3 & 0 \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Ipswich	State Zip Code MA 01938		Amount of Each Disbursement this Period
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL			235.64
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify) \	Nr. 5	
State: District:	- · · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional)			2508.82

TOTAL This Period (last page this line number only)

C. Form/Schedule: SB21b

В.

C.

FE6AN026

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LINE NUMBE (check only one)										
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	-	22 28a	23 28b	24 28c	25 29	26 30b					
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			person	for the p	urpose of	soliciting c	ontribution	is s					
NAME OF COMMITTEE (In Full)													
Massachusetts Republican State Congress	sional Committee												
Full Name (Last, First, Middle Initial) Charles Pearce					saction II	D: 10106 sement	5.E12782	2					
Mailing Address 7 Linden St				1 1	M / D	30 /	201	0 ^Y					
City Ipswich	State Zip Code MA 01938			Amo	unt of Eac	h Disburse	ment this	Period					
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL							502.3	7					
Candidate Name		Cate Typ											
Senate President	ement For: Primary General Other (specify)												
State: District: Full Name (Last, First, Middle Initial)				<u> </u>									
Michael Rigas				Date	of Disbur								
Mailing Address 24 Concord Ave, Apt 415	5			1 1	M / D	24	2 0 1	0 1					
,	State Zip Code MA 02138			Amo	unt of Eac	h Disburse							
Purpose of Disbursement PAYROLL							1515.6	1					
Candidate Name		Cated Typ											
Senate President	ement For: Primary General Other (specify)												
State: District: Full Name (Last, First, Middle Initial)													
Michael Rigas					of Disbur								
Mailing Address 24 Concord Ave, Apt 415	5			1 2	M / D	09 /	201	0 1					
	State Zip Code MA 02138			Amo	unt of Eac	h Disburse							
Purpose of Disbursement PAYROLL							1515.6	2					
Candidate Name		Cate(
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)												
State: District:													
SUBTOTAL of Disbursements This Page (optional)							3533.6	0					

TOTAL This Period (last page this line number only)

A. Form/Schedule: SB21b

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUM (check only one)											
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	21b [27	22 28a	23 28b	24 28c	25 29	26 30b					
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any p	erson	for the pu	rpose of s	oliciting co	ontributio	ns					
NAME OF COMMITTEE (In Full)													
Massachusetts Republican State Congress	sional Committee												
Full Name (Last, First, Middle Initial) Michael Rigas					saction ID of Disburs	ement	.E1276	6					
Mailing Address 24 Concord Ave, Apt 415	<u> </u>			1 ^M 2	M / D	20	2 0 1	0 Y					
,	State Zip Code MA 02138			Amou	unt of Each	Disburse	ment this	Period					
Purpose of Disbursement PAYROLL		•		L.			1515.6	31					
Candidate Name		Catego Type	ry/										
Senate President	ment For: Primary General Other (specify)												
State: District:													
Full Name (Last, First, Middle Initial) Michael Rigas				Date	saction ID of Disburs	ement							
Mailing Address 24 Concord Ave, Apt 415	;			1 ^M 2	M / D 3	3 1	2 0 1	0					
,	State Zip Code MA 02138			Amou	unt of Each	n Disburse	ment this	Period					
Purpose of Disbursement PAYROLL				L.			1515.6	64					
Candidate Name		Catego Type	ry/										
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)												
State: District:													
Full Name (Last, First, Middle Initial) Marco Schiavo				Date	saction ID of Disburs		.E1279	2					
Mailing Address 8 Elm Street LLC 352 Sprague St				1 1	M / D	30 /	ž 0 1	0					
City	State Zip Code MA 02026			Amou	unt of Each	n Disburse							
Purpose of Disbursement REGIONAL OFFICE RENT				L.			354.1	16					
Candidate Name		Catego Type	ry/										
Senate President	ment For: Primary General Other (specify)												
State: District:													
SUBTOTAL of Disbursements This Page (optional) .			<u> </u>				3385.4	11					

TOTAL This Period (last page this line number only)

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			PR LINE NUMBER: PAGE 35			35 /	45						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27			22 23 24 25 26 28a 28b 28c 29 30									
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			ny persor	n for t	the pu		e of s	oliciting co		outions				
NAME OF COMMITTEE (In Full)														
Massachusetts Republican State Congress	sional Committee													
Full Name (Last, First, Middle Initial) Peter Vitale					Trans		-	10106	.E1	2787				
Mailing Address 3 Gladstone St						M /		0 /	Ž	0 Ĭ () Y			
City	State Zip Code				Amou	nt of	Each	Disburse	men	t this f	Period			
Wakefield	MA 01880				_	-	-		-					
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL						_	-		. 3	14.73	3			
Candidate Name			tegory/ ype											
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)													
Full Name (Last, First, Middle Initial)					_									
Matthew Wood					Date o	of Di	sburse							
Mailing Address 33D Westvale Meadows					1 1	M /	^D 3	0 /	Ž	0 ť () ^Y			
•	State Zip Code MA 01742				Amou	nt of	Each	Disburse	men	t this f	Period			
Purpose of Disbursement PAYROLL							_		4	96.17	7			
Candidate Name			tegory/ ype											
Senate President	ment For: Primary General Other (specify)	<u> </u>	jpo											
State: District:														
Full Name (Last, First, Middle Initial) Mike Yacobian					Trans Date o		sburse		5.E1	2773				
Mailing Address 64 Wellesley St					1 1	M /	2	2 4 / Y	Ž	0 i () ^Y			
	State Zip Code MA 02493				Amou	nt of	Each	Disburse	men	t this f	Period			
Purpose of Disbursement PAYROLL									5	26.19				
Candidate Name			tegory/ ype											
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		7 I ⁻ -											
State: District:	· · · · · · · · · · · · · · · · · · ·													
SUBTOTAL of Disbursements This Page (optional)			▶						13	37.09				

TOTAL This Period (last page this line number only)

A. Form/Schedule: SB21b

В.

C.

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 37 / 45
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem		by any person fo	or the purpose of soliciting contributions
or for commercial purposes, other than using the name	e and address of any political	committee to soli	cit contributions from such committee
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Committee		
Full Name (Last, First, Middle Initial)			Transaction ID: 10106.E12774
Mike Yacobian			Date of Disbursement
Mailing Address 64 Wellesley St			111
City Weston	State Zip Code MA 02493		Amount of Each Disbursement this Period
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL		•	109.47
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Mike Yacobian			Transaction ID: 10106.E12775 Date of Disbursement
Mailing Address 64 Wellesley St			111
City Weston	State Zip Code MA 02493		Amount of Each Disbursement this Period
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL			106.26
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			T ID .10100 510700
Advantage Payroll Services			Transaction ID: 10106.E12768 Date of Disbursement
Mailing Address 747 Main Street #222			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 4 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \\$
City Concord	State Zip Code MA 01742		Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL			4358.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify) \(\Psi\)	Туре	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			4573.73

TOTAL This Period (last page this line number only)

A. Form/Schedule: SB21b

Transaction ID: 10106.E12774

B. Form/Schedule: SB21b Bowdoin Square Exxon 239 Cambridge St. Boston, MA 02114

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)				PR LINE NUMBER: PAGE 39 eeck only one)								
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 -	X 21b 27	2	;) !2 !8a	23 28		24 28c		25 29	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			ny persor	n for th	e pu	rpose c	of so	liciting c		outions			
NAME OF COMMITTEE (In Full)													
Massachusetts Republican State Congress	sional Committee												
Full Name (Last, First, Middle Initial) Advantage Payroll Services				D	ate c	of Disbu	ırse						
Mailing Address 747 Main Street #222					^M 1	M /	^D 3	0 /	Ž	010) ^Y		
,	State Zip Code MA 01742			A	mou	nt of Ea	ach	Disburse	-				
Purpose of Disbursement PAYROLL							•		2	05.14			
Candidate Name			tegory/ Гуре										
Senate President	ment For: Primary General Other (specify)												
State: District:													
Full Name (Last, First, Middle Initial) Advantage Payroll Services				D	ate c	of Disbu	ırse						
Mailing Address 747 Main Street #222				1 L	^M 2	M /	0	9 /	Ž	0 1 () \		
,	State Zip Code MA 01742			A	mou	nt of Ea	ach	Disburse	-				
Purpose of Disbursement PAYROLL					_		•		25	31.40			
Candidate Name			tegory/ Гуре										
Senate President	ment For: Primary General Other (specify)												
State: District:													
Full Name (Last, First, Middle Initial) Advantage Payroll Services					ate c	of Disbu	ırse						
Mailing Address 747 Main Street #222					^M 2	M /	^D 2	0 /	Ž	010)		
	State Zip Code MA 01742			A	mou	nt of Ea	ach	Disburse	-				
Purpose of Disbursement PAYROLL						•			25	31.36	5		
Candidate Name			tegory/ Type										
Senate President	ment For: Primary General Other (specify)												
State: District:													
SUBTOTAL of Disbursements This Page (optional)			•						52	67.90			

TOTAL This Period (last page this line number only)

В.

C.

SCHEDULE B (FEC Form 3X)	Llaa aana	vrata aabadula(a)		F	OR LI	NE N	IUMBE	R:			PA	GE	40 /	45
ITEMIZED DISBURSEMENTS	for each	rate schedule(s) category of the		(check only one			. ′			_	¬	_	1	
	Detailed S	Summary Page		X	21b 27	\vdash	22 28a	Н	23 28b	ŀ	24 28c		25 29	26 30b
Any Information copied from such Reports and State	ments may no	ot be sold or used	d by a	any		n for		ırpos		ol		ontril		
or for commercial purposes, other than using the nan	ne and addres	ss of any political	com	nmi	ttee to	solic	it cont	ribut	ions fr	or	n such o	omr	mittee	
NAME OF COMMITTEE (In Full)														
/ Massachusetts Republican State Congres	ssional Com	imittee												
Full Name (Last, First, Middle Initial)											10106	.E1	2772	
Advantage Payroll Services							M	of D	isburs			, , ,	/ · · ·	V
Mailing Address 747 Main Street #222							1 2		/ D3	3	Ĭ	2	0 1 ()
City Concord	State MA	Zip Code 01742					Amou	ınt o	f Each	n E	Disburse	mer	nt this I	Period
Purpose of Disbursement	IVIZ	01742		v								25	31.36	3
PAYROLL Candidate Name				oto	gory/	ч								
					gory/ pe									
Office Sought: House Disburs	ement For:	General												
President	Other (spe													
State: District:														
Full Name (Last, First, Middle Initial)									-		10106	.E1	2794	
Bank of America								of D	isburs			,	/	Y
Mailing Address 104 Canal Street							^M 2		L	1 7	7	2	0 1 ()
City Boston	State MA	Zip Code 02114					Amou	ınt o	f Each	1 E	Disburse	mer	nt this I	Period
Purpose of Disbursement	IVIA	02114	_	_								2	61.44	1
CC PROCESSING FEES			L			Ш								
Candidate Name					gory/ pe									
Office Sought: House Disburs	ement For:			.,	P -									
Senate	Primary	General												
State: District:	Other (spe	Cify)												
Full Name (Last, First, Middle Initial)							Trans	sacti	on ID	-	10106	F1	2795	
Bank of America									isburs	er	nent		_, 00	
Mailing Address 104 Canal Street							1 ^M 2	М	/ D	1 7	7 / Y	2	010) ^Y
		-						_		_				
City Boston	State MA	Zip Code 02114					Amou	ınt o	f Each	ı E	Disburse	mer	nt this	Period
Purpose of Disbursement SVC CHARGE								_				_ 1	85.40)
Candidate Name			Ca	ate	gory/	ч								
					pe									
	ement For:	Canaral												
Senate President	Other (spe	General												
State: District:		<i>→</i> , ▼												
SUBTOTAL of Disbursements This Page (optional)					ì	•						29	78.20)
						-	$\overline{}$				-			
TOTAL This Period (last page this line number only	')			• • • •	,	•								

age# 11931601003			
SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check on	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	gressional Committee		
Full Name (Last, First, Middle Initial) Bank of America Mailing Address 104 Canal Street			Transaction ID: 10106.E12797 Date of Disbursement 12
City Boston Purpose of Disbursement	State Zip Code MA 02114		Amount of Each Disbursement this Period
DEPOSIT CORRECTION Candidate Name		Category/ Type	
Office Sought: House Dis Senate President State: District:	bursement For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Mr. Philip Miatkowski			Transaction ID: 10106.E12789 Date of Disbursement
Mailing Address 485 Foster St.			111
City North Andover	State Zip Code MA 01845		Amount of Each Disbursement this Period
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL Candidate Name		Catagory	249.52
		Category/ Type	
Office Sought: House Dis	bursement For:		

General

SUBTOTAL of Disbursements This Page (optional)	>	10274.52
TOTAL This Period (last page this line number only)	•	61082.50

Primary

Other (specify)

Senate President

District:

State:

B. Form/Schedule : SB21b

CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	′ Use separate schedu	he (check on 21b	X 22 23 24 25 26
y Information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Co	e name and address of any pol		· '
Full Name (Last, First, Middle Initial) Republican National Committee Mailing Address Dwight D. Eisenhor 310 First Street, Sc			Transaction ID: 10106.E12796 Date of Disbursement
City Washington Purpose of Disbursement SEE LINE 12 - IN-KIND TRANSFER Candidate Name	State Zip Code DC 20003	Category/ Type	Amount of Each Disbursement this Period 21248.57
Office Sought: House D Senate President State: District:	isbursement For: Primary Gene Other (specify)	ral	

SUBTOTAL of Disbursements This Page (optional)	•	21248.57
TOTAL This Period (last page this line number only)	—	21248.57

PAGE 44 / 45 SCHEDULE D (FEC Form 3X) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original Debt for telemar-keting non-fea **FLS Connect** Mailing Address 7300 Hudson Blvd. Ste City State ZIP Code Saint Paul MN 55128 Outstanding Balance Beginning This Period Transaction ID: LS91217.E11763 3910.20 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 3910.20 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for research Lexis-Nexis party related Mailing Address PO Box 7247-7090 ZIP Code City State Philadelphia PA 19170 Outstanding Balance Beginning This Period Transaction ID: LS90513.E11275 250.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 250.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for research Lexis-Nexis party related Mailing Address PO Box 7247-7090 State ZIP Code City Philadelphia PΑ 19170 Outstanding Balance Beginning This Period Transaction ID: LS90513.E11276 250.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 250.00 4410.20 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 45 / 45 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each numbered line) (check only one) 9 X 10 **Excluding Loans** NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee Nature of Debt (Purpose): A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Original debt for research party related Lexis-Nexis Mailing Address PO Box 7247-7090 ZIP Code City State Philadelphia PA 19170 Outstanding Balance Beginning This Period Transaction ID: LS90513.E11277 1250.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1250.00 0.00 0.00 1250.00 1) SUBTOTALS This Period This Page (optional)..... 5660.20 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

5660.20